L11000/3/333

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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DEPARTMENT OF STATE

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ACCOUNT	NO.	•	I2000000019!	5

REFERENCE: 135502 4720460

AUTHORIZATION :

COST LIMIT : \$/25,00

ORDER DATE: March 19, 2012

ORDER TIME : 9:32 AM

ORDER NO. : 135502

CUSTOMER NO: 4720460

CHANGE OF AGENT

NAME: 125502 LINES 1-53

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: 4641 OLD CA	NOE CREEK ROAD OPERA	TIONS LLC		
2. (a) Principal office address of limited liability company	Suite 200			
(Note: MUST BE STREET ADDRESS)				
	Maitland, FL 32751			
(b) Mailing address of limited liability company:		್ಷಾಣ ನ		
(Note: MAY BE POST OFFICE BOX)		#9 x		
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11/18/2011	L11000131333		3) 3)	
3. Date of filing/registration in Florida	4. Document number	<u>e</u>	= -	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept	. of State: N		
Registered Agent:	CT Corporation System	<u> </u>		
Registered Office Address:	1200 South Pine Island Road	d		
· ·	Plantation, FL 33324			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: Corporation Service Compan			
NEW Registered Office Address:	1201 Hays Street			
(MUST BE FLORIDA STREET ADDRESS)				
	Tallahassee	,FL_32301		
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. Hauten Cather	et address of the registered office ase of a Florida limited liability by an affirmative vote of the m	ce and the busing y company, it is embers of the lir	ess nited	
Signature of a member or authorized representative of a member)	-			
Maureen Cathell, Authorized Person (Printed or typed name of signee)	_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro	gree to act in this capacity. It	further agree to		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	oper and complete performanc as registered agent as provide change in the registered office d in writing of this change.	e of my duties, a d for in Chapter address, I hereb	nd I · 608, y	
By: Xhow the high	oper and complete performance as registered agent as provide change in the registered office in writing of this change. Grace E. Kirby, Asst. VP	e of my duties, a d for in Chapter address, I hereb	nd I · 608, y	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00